

Breastfeeding in Maine

A DATA BRIEF FOR PUBLIC HEALTH & HEALTHCARE PROFESSIONALS



Maine Center for Disease Control and Prevention
An Office of the
Department of Health and Human Services

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

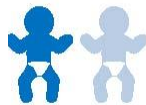
Breastfeeding is an effective approach to reducing lifelong risk for chronic disease.¹ It helps protect babies against asthma, type 2 diabetes and obesity. Breastfeeding also reduces the risk of sudden infant death syndrome (SIDS) and protects babies from ear infections and pneumonia.

Improving breastfeeding duration rates in Maine can support future health.

- In 2011, **82 percent** of Maine infants were ever breastfed, up from **75 percent** in 2004^{2†}

- Exclusively breastfed until 3 months:

1 in 2 infants



- Exclusively breastfed for 6 months:

1 in 4 infants



Breastfeeding, Obesity & Diabetes

Research studies show that breastfeeding:

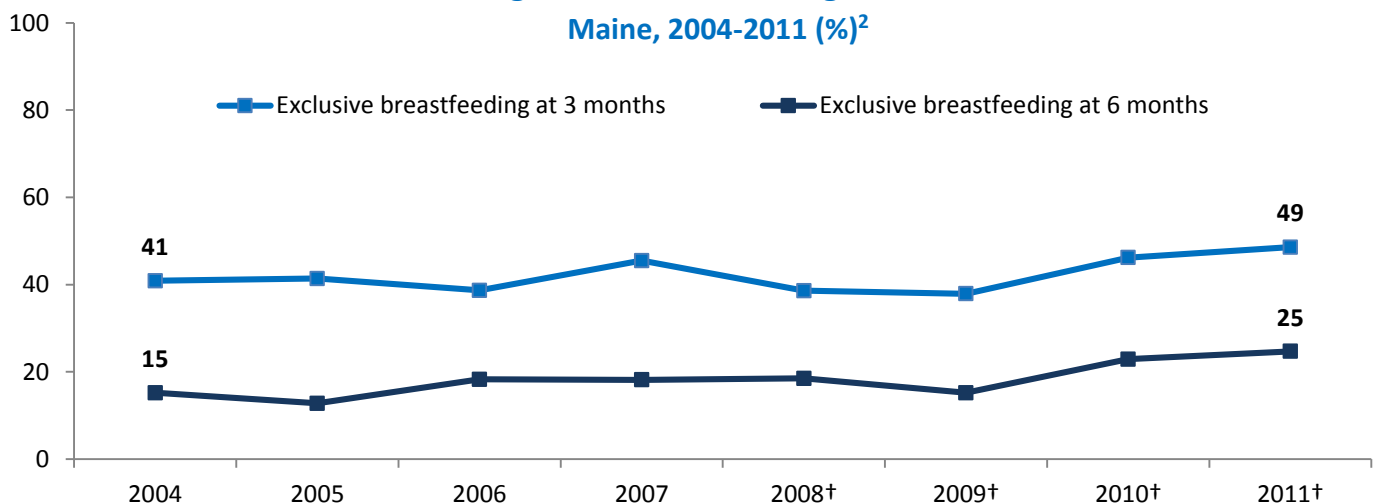
- Protects children against obesity and future type 1 and type 2 diabetes^{3,4}
- Reduces the risk of maternal type 2 diabetes⁴

Exclusive breastfeeding rates in Maine are better than U.S. rates.

- In 2011, **82 percent** of Maine infants were ever breastfed (similar to the U.S., 79 percent)⁵
- More Maine infants were exclusively breastfed at 3 months (**49 percent**) and 6 months (**25 percent**) than compared to the U.S. (41 percent at 3 months, 19 percent at 6 months)⁵

Figure 1. Breastfeeding Trends

Maine, 2004-2011 (%)²



Breastfeeding Disparities in Maine

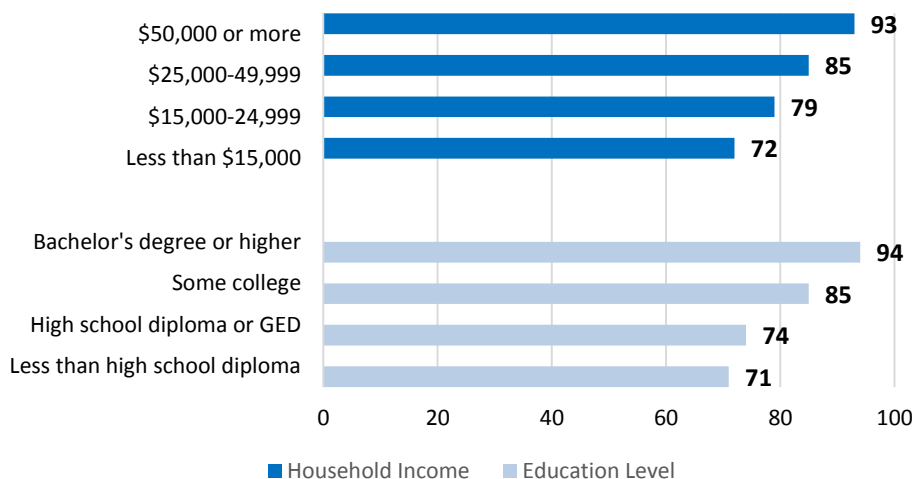
- Mothers with an annual household income less than \$50,000 are significantly less likely to ever breastfeed than those with an annual household income greater than \$50,000⁶ (Figure 2)

- Mothers with less than a 4-year college degree are significantly less likely to ever breastfeed than those with a college degree or higher⁶ (Figure 2)

- Mothers who are American Indian/Alaskan Native are significantly less likely to breastfeed than mothers who are white or Asian/Pacific Islander⁶

- Mothers who have MaineCare are significantly less likely to ever breastfeed (**76 percent**) than mothers who do not have MaineCare (**91 percent**)⁶

Figure 2. Ever Breastfed by Maternal Household Income and Education Level, 2011 (%)⁶



Breastfeeding Recommendations

The Academy of American Pediatrics recommends:

- babies be exclusively breastfed for their first 6 months,
- babies continue to breastfeed for a year, as long as mutually desired by the mother and baby,
- and breastfeeding be physician supported for as long as it is the right choice for mother and baby.⁷

What Can You Do?

Providers can:

- Encourage pregnant women to breastfeed
- Refer nursing mothers to a lactation consultant

Staff caring for moms and babies can:

- Support [skin to skin](#) contact
- Promote [rooming in](#)
- Provide breastfeeding education

Sources: 1. Office on Women's Health, U.S. Department of Health and Human Services, <http://www.womenshealth.gov/breastfeeding/index.html>. 2. 2001-2007 National Immunization Tables, 2008-2010 National Immunization Survey, 2011-2014 Breastfeeding Report Cards. †Indicates provisional data. 3. <http://www.cdc.gov/obesity/childhood/causes.html> 4. <http://www.ncbi.nlm.nih.gov/pubmed/21348815> 5. Center for Disease Control and Prevention National Immunization Survey, 2011 births. 6. Pregnancy Risk Assessment Monitoring System, 2009-2011 ; Statistically significant differences determined by non-overlapping 95% confidence intervals. 7. Academy of American Pediatrics, <https://www2.aap.org/breastfeeding/faqsBreastfeeding.html>

MAINE CENTER FOR DISEASE CONTROL AND PREVENTION, (207) 287-2273
www.maine.gov/dhhs/mecdc/population-health/hmp/panp/breastfeeding.html



Department of Health
and Human Services

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